

PATENT
Attorney Docket No. BSC-165

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANTS: Haarala et al.
SERIAL NO.: 09/838,618 GROUP NO.: 3763
FILING DATE: April 19, 2001 EXAMINER: Not Yet Assigned
TITLE: Catheter Slit Valves

CERTIFICATE OF FIRST CLASS MAILING UNDER 37 C.F.R. 1.8

I hereby certify that this correspondence, and any document(s) referred to as enclosed herein, is/are being deposited with the United States Postal Service as first class mail, postage prepaid, in an envelope addressed to the Assistant Commissioner for Patents, Washington, DC 20231 on this 10th day of August, 2001.


Diane Racicot

Assistant Commissioner for Patents
Washington, D.C. 20231

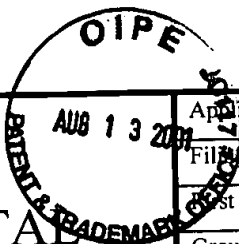
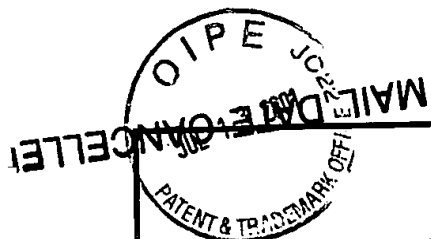
Sir:

Submitted herewith are:

1. Transmittal Form (1 page);
2. Supplemental Information Disclosure Statement (2 pages);
3. Supplemental Form PTO-1449 (1 page);
4. References Labeled A12
5. and a return receipt postcard.

RECEIVED
AUG 16 2001
TC 3700 MAIL ROOM

3763



TRANSMITTAL FORM

Application Serial No.:	09/838,618
Filing Date:	April 19, 2001
First Named Inventor	Haarala
Group Art Unit	3763
Examiner Name	Not Yet Assigned
Attorney Docket No.	BSC-165

ENCLOSURES (check all that apply)

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Check Attached <input type="checkbox"/> Copy of Fee Transmittal Form <input type="checkbox"/> Amendment/Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Letter to Official Draftsperson including Drawings [Total Sheets ____] <input type="checkbox"/> Extension of Time Request <input checked="" type="checkbox"/> Supplemental Information Disclosure Statement PTO-1449 <input checked="" type="checkbox"/> Copy of IDS Citations <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application	<input type="checkbox"/> Copy of Notice to File Missing Parts of Application (PTO-1553) <input type="checkbox"/> Formal Drawing(s) <input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney (Revocation of Prior Powers) <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Executed Declaration and Power of Attorney for Utility or Design Patent Application <input type="checkbox"/> Small Entity Statement <input type="checkbox"/> Request for Refund <input type="checkbox"/> After Allowance Communication to Group	<input type="checkbox"/> Appeal Communication to Board of Patent Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Return Receipt Postcard <input checked="" type="checkbox"/> Certificate of First Class Mailing under 37 C.F.R. 1.8 <input type="checkbox"/> Additional Enclosure(s) (please identify below)
--	---	---

RECEIVED
 AUG 16 2001
 3700 MAIL ROOM

CORRESPONDENCE ADDRESS

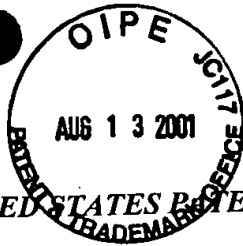
Direct all correspondence to: Patent Administrator
 Testa, Hurwitz & Thibault, LLP
 High Street Tower
 125 High Street
 Boston, MA 02110
 Tel. No.: (617) 248-7000
 Fax No.: (617) 248-7100

SIGNATURE BLOCK

Date: August 10, 2001
 Reg. No. 42,545
 Tel. No.: (617) 248-7675
 Fax No.: (617) 248-7100

Respectfully submitted,

John V. Forcier
 John V. Forcier
 Attorney for Applicants
 Testa, Hurwitz & Thibault, LLP
 High Street Tower
 125 High Street
 Boston, MA 02110



PATENT
Attorney Docket No. BSC-165
(1002/222)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANTS: Haarala et al.
SERIAL NO.: 09/838,618 GROUP NO.: 3763
FILING DATE: April 19, 2001 EXAMINER: Not Yet Assigned
TITLE: Catheter Slit Valves

TC 3700 MAIL ROOM

AUG 16 2001

RECEIVED

#3

SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT

Assistant Commissioner for Patents
Washington, D.C. 20231

Sir:

In accordance with the provisions of 37 C.F.R. § 1.97, Applicants hereby make of record the reference listed on the accompanying PTO Form 1449 for consideration by the Examiner in connection with the examination of the above-identified patent application. A copy of the reference is enclosed.

REMARKS

In accordance with the provisions of 37 C.F.R. §1.97, this statement is being filed (CHECK ONE):

- ☒ (1) within three (3) months of the **Filing Date** or before the mailing date of the **First Office Action** on the merits; or
- ☐ (2) after the period defined in (1) but before the mailing date of a **Final Rejection** or **Notice of Allowance**, and
- ☐ the requisite Statement is below, **OR**
- ☐ the requisite fee under Rule 1.17(p), namely **\$240.00**, is included herein, or
- ☐ (3) after the mailing date of a **Final Rejection** or **Notice of Allowance** but before the payment of the **Issue Fee**, **AND**
- ☐ Applicant hereby Petitions the Commissioner to accept and consider the attached Information Disclosure Statement, **AND**
- ☐ the requisite Statement is below, **AND**
- ☐ the requisite petition fee due under Rule 1.17(i)(I), namely **\$130.00** is included herein.

It is respectfully requested that each of the references shown on the attached Form PTO-1449 be made of record in this application.

STATEMENT

As required under §1.97(e), Applicants, through the undersigned, hereby state either that [check the appropriate space]:

- ☐ 1. [E]ach item of information contained in the Information Disclosure Statement was cited in a communication from a foreign patent office in a counterpart foreign application **not more than** three months prior to the filing date of the Information Disclosure Statement; or
- ☐ 2. [N]o item of information contained in the Information Disclosure Statement was cited in a communication from a foreign patent office in a counterpart foreign application, and to the knowledge of the person signing this Statement after making reasonable inquiry, no item of information contained in the Information Disclosure Statement was known to **any** individual designated in §1.56(c) **more than** three months prior to the filing of the Information Disclosure Statement.

FEE AUTHORIZATION

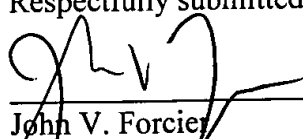
Should any fee associated with the submission of this paper not be attached hereto as a check, the Commissioner is authorized to charge the missing fee to our Deposit Account, No. 20-0531. Any overpayments should be credited to said Deposit Account.

Date: August 10, 2001
Reg. No. 42,545

Tel. No.: (617) 248-7675
Fax No.: (617) 248-7100

2153077

Respectfully submitted,


John V. Forcier
Attorney for Applicants
Testa, Hurwitz, & Thibeault, LLP
High Street Tower
125 High Street
Boston, Massachusetts 02110

RECEIVED
AUG 16 2001
TC 3700 MAIL ROOM